2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V32441

Entity Name: PIXLEY GREENHOUSES, INC.

FILED Apr 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

20900 HWY 44E

EUSTIS, FL 32726 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1828 EUSTIS, FL 32727

FEI Number: 59-3120363 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIXLEY, THOMAS D
5025 GREENBRIAR TRAIL
MOUNT DORA, FL 32757 US
PIXLEY, THOMAS D
8065 LAUREL RIDGE DRIVE
MOUNT DORA, FL 32757 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THOMAS PIXLEY 04/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BOPP, TAMARA L., BOPP-ROBINSON, TAMARA L Name: Name: 1903 SHADOWWOOD PKWY 320 SOUTHSHORE LANE Address: Address: City-St-Zip: ATLANTA, GA 30339 City-St-Zip: DALLAS, GA 30157

Title: P () Delete Title: D (X) Change () Addition

 Name:
 PIXLEY, THOMAS D.,
 Name:
 PIXLEY, THOMAS D.

 Address:
 P.O. BOX 1828 N/A
 Address:
 8065 LAUREL RIDGE DRIVE

 City-St-Zip:
 EUSTIS,, FL 327271828
 City-St-Zip:
 MOUNT DORA, FL 32757

Title: S () Delete Title: S (X) Change () Addition

 Name:
 PIXLEY, MARY C.,
 Name:
 PIXLEY, MARY C

 Address:
 P.O. BOX 1828 N/A
 Address:
 8065 LAUREL RIDGE DR

 City-St-Zip:
 EUSTIS,, FL
 City-St-Zip:
 MOUNT DORA, FL 32757

Title: () Delete Title: (X) Change () Addition PIXLEY-CONNOR, MELISSA PIXLEY-CONNOR, MELISSA P Name: Name: Address: P O BOX 1828 Address: 23134 OAK CLUSTER DRIVE City-St-Zip: City-St-Zip: EUSTIS, FL 327271828 SORRENTO, FL 32776

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISSA PIXLEY-CONNOR P 04/11/2005